	PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number			
Effective December 8, 2004									10/543,165				
CLAIMS AS FILED - PART I							_	SMALL EN	ITITY	OR	OTHER	R THAN	
ŀ	S. 114.710.444		(Column 1)	) 	-	(Column 2)	7		<del></del>	ا	SMALL	ENTITY	
۲	S. NATIONAL	L STAGE FEES					4	RATE	FEE	4	RATE	FEE	
8/	SIC FEE		SMALL ENT. = \$ 150		LAR	GE ENT = \$ 300		BASIC FEE		OR	BASIC FEE	300	
EXAMINATION FEE			Satisfies PCT Article 33(1)- (4) = \$ 50 / \$ 100			ther situations = 100 / \$ 200		EXAM. FEE			EXAM. FEE	200	
SE	ARCH FEE		U.S. is ISA = \$50/ ALL other countrie \$ 200 / \$ 400	es =		ther situations = 3 250 / \$ 500		SEARCH FEE			SEARCH FEE	400	
FE	E FOR EXTRA	SPEC. PGS.	minus 1	= 001		/ 50 =		X \$ 125 =			X \$ 250 =		
то	TAL CHARGE	ABLE CLAIMS	// minus	20 = .				X \$ 25 =		OR	X \$ 50 =		
INC	EPENDENT C	LAIMS	3 minus	s 3 = .			1	X \$ 100 =		OR	X \$ 200 =		
MU	LTIPLE DEPE	NDENT CLAIM PR	ESENT					+ \$ 180 =		OR	+\$ 360 =		
If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	900	
	9122	(Column 1) CLAIMS REMAINING		(Column HIGHES NUMBE REVIOU	1 2) ST	(Column 3)  PRESENT EXTRA		SMALL I	ADDI- TIONAL	OR	OTHER SMALL I		
AMENDMENT A	100	AFTER AMENDMENT		PAID FO		EXIM			FEE			FEE	
	Total		Minus	$\alpha$	<u>ر</u>			X \$ 25 =		OR	X \$ 50 =		
	Independent	1.3	Minus		)			X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						l	+ \$ 180 =		OR	+ \$ 360 =		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)	(0	Column	2)	(Column 3)							
(TB		CLAIMS REMAINING AFTER AMENDMENT	PF	HIGHES NUMBER REVIOUS PAID FOR	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
CME C	Total	•	Minus **			= :	ľ	X \$ 25 =		OR	X \$ 50 =		
AMENDMENT	Independent	•	Minus ***			=		X \$ 100 =		OR	X \$ 200 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ſ	+ \$ 180 =		OR	+ \$ 360 =		
TOTAL ADDIT.  FEE OR TOTAL ADDIT.  FEE													
	( the entry la a-4 :	4 la lace Mara ** **		son to co									
, i	f the "Highest Nu f the "Highest Nu	mber Previously Paid raber Previously Paid	entry in column 2, write i For" IN THIS SPACE I i For" IN THIS SPACE I For" (Total or Independe	is less that is less that	an 20'. an 3', c	enter "20". enter "3".	n the	eppropriate bax	in column 1.				

FORM PTO-875 (Rev. 02/2005)

Palent and Trademark Office - U.S. DEPARTMENT OF COMMERCE